

Supplemental Application Data Sheet**Application Information**

Application number:: 10/501699
Filing Date:: 07/16/04
Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: 1626
CD-ROM or CD-R?: None
Sequence submission?: None
Computer Readable Form (CRF)?:: No
Title:: COMPOUNDS FOR MODULATING CELL
PROLIFERATION
Attorney Docket Number:: LYMF-P01-004
Request for Early Publication?: No
Request for Non-Publication?: No
Small Entity?: Yes
Petition included?: No
Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Chaim
Middle Name:: M.
Family Name:: Roifman
City of Residence:: North York
Country of Residence:: Canada
Street of mailing address:: 33 Christine Crescent
City of mailing address:: North York
State or Province of mailing address:: ON

Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M2R 1A4

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Peter
Family Name:: Demin
City of Residence:: ~~Toronto~~ Moscow
Country of Residence:: ~~Canada~~ Russian Federation
Street of mailing address:: ~~414-40 High Park Avenue~~ 23 Gogolevsky
Blvd., Apt. 4
City of mailing address:: ~~Toronto~~ Moscow
State or Province of mailing address:: ON
Country of mailing address:: ~~Canada~~ Russian Federation
Postal or Zip Code of mailing address:: ~~M6P 2S4~~ 119019

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Thomas
Family Name:: Grunberger
City of Residence:: Toronto
Country of Residence:: Canada
Street of mailing address:: 63 Robingrove Road
City of mailing address:: Toronto
State or Province of mailing address:: ON
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M2R 3A1

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Russian Federation

Status:: Full Capacity
Given Name:: Olga
Family Name:: Rounova
City of Residence:: ~~Toronto~~ Moscow
Country of Residence:: ~~Canada~~ Russian Federation
Street of mailing address:: ~~414-40 High Park Avenue~~ 23 Gogolevsky
Blvd., Apt. 4
City of mailing address:: ~~Toronto~~ Moscow
State or Province of mailing address:: ~~ON~~
Country of mailing address:: ~~Canada~~ Russian Federation
Postal or Zip Code of mailing address:: ~~M6P 2S4~~ 119019

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Octavian
Middle Name:: Laurand
Family Name:: Cimpean
City of Residence:: Thornhill
Country of Residence:: Canada
Street of mailing address:: 45 Macauley Drive
City of mailing address:: Thornhill
State or Province of mailing address:: ON
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: L3T 5S6

Correspondence Information

Correspondence Customer Number:: 28120

Representative Information

Representative Customer Number:: 28120

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	CA03/00032	01/17/03
CA03/00032	An application claiming the benefit under 35 USC 119(e)	60/349214	01/18/02
CA03/00032	An application claiming the benefit under 35 USC 119(e)	60/349215	01/18/02
CA03/00032	An application claiming the benefit under 35 USC 119(e)	60/349216	01/18/02

Foreign Priority Information**Assignee Information**

Assignee name:: The Hospital for Sick Children
Street of mailing address:: 555 University Avenue
City of mailing address:: Toronto
State or Province of mailing address:: ON
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: M5G 1X8